

Well Name _____



DEPARTMENT OF MINES, MINERALS AND ENERGY
DIVISION OF GAS AND OIL
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APPENDIX FOR EXPLORATION PERMIT IF
THE WELL WORK INVOLVES DRILLING, REDRILLING OR DEEPENING

NOTE: The data in this appendix are estimates only. Actual data must be submitted on the "Report on Completion of Well Work" form.

DRILLING CONTRACTOR (If known) _____
ADDRESS _____
TELEPHONE _____

DEPTH OF COMPLETED WELL: _____ FEET (actual _____ / estimated _____)
DRILLING RIG: _____ ROTARY _____ CABLE TOOL

GEOLOGICAL DATA:	TOP	DEPTH	BOTTOM	THICKNESS
FRESH WATER:				

SALT WATER:

GEOHERMAL
RESOURCES:

The data on depth of strata is based on the source (s) checked below:

_____ Applicant's own drilling experience in the area
_____ Information already in the possession of the Inspector
_____ As follows: _____

APPLICANT: _____
BY: _____
ITS: _____

VERIFICATION

STATE OF _____
COUNTY OF _____

Well Name _____

CASING AND TUBING PROGRAM

PRELIMINARY INFORMATION: Indicate estimated length and size of the pipe to be used.

PROGRAM DETAILS:

CONDUCTOR:

CASING CIRCULATED AND CEMENTED INTO THE SURFACE:

PRODUCTION CASING TO BE SET, CIRCULATED AND CEMENTED TO THE SURFACE:

OTHER CASING AND TUBING LEFT IN THE WELL:

OTHER CASING USED IN DRILLING BUT NOT LEFT IN THE WELL: